PUBLIC HEALTH

and the law

by William J. Curran, J.D., S.M.Hyg., F.A.P.H.A.

Decriminalization, Demythologizing, Desymbolizing and Deemphasizing Marijuana

The four present participles used in the title of this column are drawn from the report of the National Commission on Marijuana and Drug Abuse. In fact, these words summarize the report itself. The Commission does a fine job in its anti-myth campaign and in its iconoclasm. Looked at as a summary of research findings in the field, it has produced an invaluable document. 2

The Commission concludes that there is little proven danger of physical or psychological harm from experimental or intermittent use of marijuana, including the resinous mixtures commonly used in this country. The risk lies in heavy, long-term use of the most potent preparations. The experimenter and intermittent user develops little or no dependence on the drug and no demonstrable organ damage. The heavy user shows strong psychological dependence. Organ damage, particularly pulmonary function, is possible in this group. Specific behavior changes are also found. The report concludes that experimental and intermittent use of the drug carries very minimal risk to the public health while attention should be concentrated on the latter group. In terms of numbers, it reports that some 24 million Americans, mainly youths and young adults, have tried the drug with 8.3 million still using it. Among those who continue its use, the great majority do so only intermittently, or one to ten times per month. Only about 2%, or 500,000 people, now use the drug heavily.

The Commission studied the relationship of marijuana and crime. It came to the conclusion that marijuana does not cause violent or aggressive behavior. In fact, it was said to dampen down such tendencies in users. It was also found that marijuana does not constitute a significant influence on non-violent or delinquent conduct.

Much space, and some excellent prose writing, was given over to a discussion of the use of marijuana among youths as a symbol of rejection of the older generation and its social system. The report asserts, "Youth of today are better fed, better housed, more mobile, more affluent, more schooled and probably more bored with their lives than any generation which has preceded them." To this statement I give a writer's highest compliment: I wish I had written it. These pages of the report are very well done, I recommend them most heartily.

But the Commission's fine work is in trouble. Any follower of the mass media is aware of this. The report has been attacked by Vice President Spiro Agnew and by Mayor Frank Rizzo of Philadelphia. It has been criticized by Harry Anslinger, former head of the U. S. Narcotics Bureau, and by Edward Cass, present head of the Bureau's program in New England. Anslinger, for example, predicted that adoption of its recommendations would result in "a

million lunatics filling up the mental hospitals and a couple of hundred thousand more deaths on our highways." The unkindest cut of all, however, came from U. S. Surgeon General, Jesse L. Steinfeld who disagreed openly with its key recommendations and asserted that President Nixon felt the same way.

What is the basis of this reaction? There seems to have been no rebuttal to the factual parts of the report. The criticism seems to have come only with the Commission's recommendations. Considering the factual conclusions, the recommendations are relatively conservative. The Commission did not recommend taking off all penalties on marijuana trafficking and use. They were rather clearly against the commerce in the drug and its widespread use. They suggested, however, a discouragement policy with concentration on prevention of heavy use. They recommended continuing on the books the felony penalties for cultivation, importation, exportation, sale, and distribution of marijuana. They also recommended keeping the penalties for possession with intent to resell.

It was in the area of possession for personal use that the Commission recommended "decriminalization." For possession in public of less than an ounce of marijuana they suggested that law enforcement personnel only seize the drug as contraband, but without penalty to its holders. Casual distribution of small amounts for no remuneration or insignificant payment not mounting to a profit would also no longer be criminal. However, use of the drug in public would remain criminal as would operating a motor vehicle while under the influence of marijuana. Most importantly, all penalties would be removed for possession and use of marijuana in the privacy of the home. It is this last recommendation which has been most frequently publicized and most frequently attacked. The popular media has concentrated on this aspect of the report almost to the exclusion of other sections.

The attack on the Commission's report seems based in the same symbolism that the Report attempted to avoid. The conservative, anti-marijuana groups see the decriminalizing of possession and use in private as a public endorsement of the idea that marijuana is not dangerous.

The Commissioners would seem to have been influenced by both the failures and successes of alcohol prohibition during the 1920s. The failures are well-known to the American public; the successes have been overlooked. The Commissioners point out that if there was a majority in favor of prohibition, it was directed mainly at the evils of the public saloon and rowdy drunkenism and at the large, unscrupulous liquor dealers, not at the use of alcohol in the home. At that time, only five states prohibited possession of alcoholic beverages for personal use in the home. Otherwise, both the federal

laws and the state laws did not outlaw home possession and consumption. "The Great Experiment" with alcohol prohibition failed in any effort to stamp out alcohol use by Americans, but it did succeed in eliminating the pre-Prohibition style saloon and unrestrained distribution of alcoholic beverages. These did not return after Prohibition's repeal in 1932.

The Commission seemed to be aiming at a similar control program for marijuana. A vigorous regulatory effort should reduce the supply of marijuana available and discourage widespread use. Yet, removing the criminal penalties for private possession should reduce selective enforcement of the laws now against the young people who defiantly use it, pointing out that it isn't harmful. Having found that the drug is not harmful in intermittent use, the Commissioners did not feel justified in any other conclusion. They pointed to the American legal system's respect for privacy and the raising of such a right to Constitutional protection by the Supreme Court in Griswold v. Connecticut. They felt that the very minimal personal harmfulness of marijuana did not warrant breaching this privacy of the individual and his home.

It seems to me that the Commission has reached wise conclusions. Its recommendations are somewhat Solomonesque in their complexity. They are not easily expressed in a newspaper headline and do not have the simplicity or polarization of a popular political slogan. But perhaps Solomon would not have won a popular election either. Yet, I rather think this Commission may have hit on practical solutions in a field they describe as having the ingredients of "a marijuana mix—medical, legal, social, philosophical, and moral."9 They may have found ideas whose time has come.

References

- 1. Marijuana: A Signal for Misunderstanding, First Report of the National Commission on Marijuana and Drug Abuse, U. S. Gov. Ptg. Office, Washington, D. C., 1972.
- 2. The Commission has subsequently published two volumes of its technical reports as Appendix I and Appendix II.
- First Report, page 94.
 The section is called "The World of Youth", pp. 94-102.
- 5. Philadelphia Enquirer, p. 1 (March 22, 1972).
- 6. Associated Press Release, Boston Globe, p. 1 (March 23, 1972). 7. Boston Globe, p. 20 (March 24, 1972).
- 8. Even the New York Times in its page one story on the release of the report headlined, "Marijuana Panel Urges Eased Laws", and devoted its entire first paragraph to the recommendation to remove penalties for private possession and use.
- 9. First Report, page 23.

Dr. Curran is Frances Glessner Lee Professor of Legal Medicine on the faculties of Public Health and Medicine, Harvard University (55 Shattuck Street), Boston, Massachusetts

BOOK REVIEWS

All reviews are prepared on invitation. Unsolicited reviews cannot be accepted. Opinions expressed are entirely those of the reviewers.

Urban Health Services: The Case of New York. Eli Ginsburg and Others. Columbia University Press, 1971. \$10.00. 250 pp.

Urban Health Services, the research product of the Conversation of Human Resources Project, at Columbia University, presents a broad picture of the characteristics, problems, and future prospects of personal health services in New York City. Though much of its contents are not new to students of the New York scene, it provides a needed overall analysis of the development and performance of health services in New York City. The main focus is upon the role of the City, which spends roughly 1 billion dollars a year on health services, in particular the municipal hospital system, and the relationship between the public and private sectors.

Prepared for the New York City Planning Commission, the book approaches urban health services primarily from an economic perspective, which is its strongest suit. Moreover, it is remarkably sensitive to the political and social forces that shape and constrain urban health "systems" in general and New York City's in particular.

The authors' primary purpose is "to discover, if possible, why most of the recommendations proposed by successive groups of medical and community leaders to alter the structure of the health services industry in New York City . . . (to improve) the quantity and quality of care were not followed." Although their explanation makes limited use of political and organizational theory, the book clearly shows how severely the solution of health service problems is constrained by the pluralism of urban political systems as well as by the diverse organization of health services. That the book deals with the New York scene does not diminish its importance; much can be learned from it of value in understanding and dealing with health systems in other settings. Individual chapters examine such basic questions as: manpower; capital funding; managing capital projects; affiliation of municipal hospitals with medical schools and voluntary hospitals; emergency room services; ambulatory services; and regionalization of health services.

Basil J. F. Mott, Ph. D.

Predicting Longevity: Methodology and Critique. Charles L. Rose and Benjamin Bell. D.C. Health and Company, Lexington, Mass., 1971. 265 pp., \$15.00.

The primary purposes of this book are

methodological: to advance the state of knowledge of the methodology of longevity research and to increase the understanding of multivariate data analysis methods for social research in general. The level of the book makes it more suitable to the statistically sophisticated than the novitiate.

The book described in some detail a study of 70 variables for 500 life histories gathered from the next-of-kin on death certificates, with particular emphasis on the methodology which was used. A battery of multivariate techniques were used such as zero order correlation, multiple regression, linear discriminant analysis, factor analysis, nonlinear discriminant analysis and nonlinear clustering.

Multivariate analysis is attracting a great deal of attention, now that its onerous calculations can be handled by high-speed computers. The results of such techniques are presented in generalities such as equations with multiple variables. The methods are not fully satisfying to epidemiologists who prefer to deal directly with basic rates when conducting their research. Nevertheless, multivariate methods have been found useful for screening a large number of variables to select those which appear to be most important for study in greater depth.

The book deviates somewhat from the terminology of epidemiology, for example by using terms such, "predicting longevity" in